

# **Regional Transit Authority Change Order Routing Sheet**

INSTRUCTION: The user department is responsible for providing the information requested below (all parts), securing the requisite signatures, attaching a justification for the change order, and providing a responsibility determination, with pertinent contact information.

Date Created	March 17, 2025
Change Order ID	348

# A. Department Representative to participate in procurement process.

Name: O'SULLIVAN, DORIS
Title: PROJECT MANAGER III

Ext: 8380

#### **B.** Contract Information:

<b>Contract Number</b>	
PO Number	915059_2
<b>Contract Title</b>	Trapeze Software License and Maintenance Agreement

### **Contract-History:**

Original Award Value	162446
<b>Previously Executed Change Order Value</b>	197365
Adjusted Contract Value	359811
<b>Current Change Order Value</b>	15811
<b>Revised Contract Value</b>	375622

## C. Justification of Change Order

Trapeze excluded costs of FX and Blockbuster Maintenance charges from the original 12/20/2024 Change Order requiring RTA to pay the balance before annual renewal. Reduced Peak Vehicle Count to 116 to reach a lower cost. Deducting the previously issued Change Order from the newly quoted amount leaves balance of 15,811. The requisition is for the 2024 - 2025 maintenance fees for the increase license count for FX and Blockbuster.

### D. Type of Change Request: Administrative

## E. Certification of Authorized Grant:

Is this item/specification consistent	
with the Authorized Grant?	
Are there any amendments pending?	



If yes see explanation (attachments are	
in the SharePoint folder for this request)	
Director of Grants/ Federal Compliance: Signature: Date:	
F. Safety, Security, And Emergency Managem	ent: Include Standard Safety Provisions Only:
Additional Safety Requirements Attached:	

Chief: Signature:

Date:

# **Risk Management:**

Include Standard Insurance Provisions Only?	No
Include Additional Insurance Requirements Attached?	

Risk Management Analyst:

**Signature:** 

Date:

# **G.** Funding Source:

Independent Cost Estimate (ICE): \$15,811.00
Projected Total Cost: \$15,811.00
Funding Type: Local

Federal Funding	State	Local	Other
		\$15,811.00	
Projected Fed Cost	State	Local	Other
		\$15,811.00	

FTA Grant IDs	<b>Budget Codes</b>
	01-2900-02-7140-021-13-00-00000-00000

Capital Project Approval if required signature ID#:

Dir Capital Projects:

Signature:

Date:



Budget Analyst: Erin Ghalayini Signature: Erin Ghalayini Date: March 18 2025

H. Prime firm's DBE/SLDBE Commitment (NOTE: The Prime Firm must be notified by the Project Manager that the DBE Commitment percentage applies to the Total Contract Value after all amendments and change orders.):

DBE % Goal	0
SLDBE % Goal	0
SBE % Goal	0

Director of Small Business Development: Adonis Charles Expose' Signature: Adonis Charles Expose'

**Date:** March 19 2025

DBE/EEO Compliance Manager Adonis Charles Expose'
Signature:

Adonis Charles Expose'

March 19 2025

I. **Authorizations**: I have reviewed and approved the final solicitation document.

Department Head: Sterlin J Stevens
Signature: Sterlin & Stevens
Date: March 18 2025

Chief: Dwight Daniel Norton
Signature: Dwight Daniel Norton
March 19 2025

**Director of Procurement: Ronald Gerard Baptiste** 

Signature: Ronald Gerard Baptiste
Date: March 19 2025

Required if Total Cost above \$15K

Chief Financial Officer: Gizelle Johnson Banks
Signature: Gizelle Johnson Banks
Date: March 19 2025

Required if Total Cost above \$50K

**Chief Executive Officer:** 

Signature: Date: